

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 06/29/01

2 Serial/Patent # 09/009,248

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
<input type="checkbox"/>	Filing			\$							
<input type="checkbox"/>	Amendment			\$							
<input checked="" type="checkbox"/>	Extension of Time	17	3/18/01	\$ 890							
<input type="checkbox"/>	Notice of Appeal/Appeal			\$							
<input type="checkbox"/>	Petition			\$							
<input type="checkbox"/>	Issue			\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$							
<input type="checkbox"/>	Maintenance			\$							
<input type="checkbox"/>	Assignment			\$							
<input type="checkbox"/>	Other			\$							
		7 TOTAL AMOUNT OF REFUND	\$ 890								
		8 TO BE REFUNDED BY:									
<input type="checkbox"/> 10 REASON:		Treasury Check									
<input type="checkbox"/>	Overpayment	Credit Deposit A/C #:									
<input type="checkbox"/>	Duplicate Payment	, <table border="1" style="display: inline-table;"><tr><td>1</td><td>9</td><td>--</td><td>3</td><td>1</td><td>4</td><td>0</td></tr></table>			1	9	--	3	1	4	0
1	9	--	3	1	4	0					
<input checked="" type="checkbox"/>	No Fee Due (Explanation):										

*EXTENSION WAS FILED TOO LATE*

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: MARIANNE MORGAN TITLE: PARALEGAL

SIGNATURE: Marianne Morgan PHONE: 306-3475

OFFICE: PETITIONS

\*\*\*\*\* THIS SPACE RESERVED FOR FINANCE USE ONLY: \*\*\*\*\*

APPROVED: Jana Chase DATE: 06/29/01

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B